Interview Summary	Application No.	Applicant(s)	
	10/577,289	BIMBER, OLIVER	
	Examiner	Art Unit	
	Jennifer L. Doak	2872	
All participants (applicant, applicant's representative, PTO personnel):			
(1) <u>Jennifer L. Doak</u> .	(3)		
(2) <u>Mr. Levoritz (reg.# 50,151)</u> .	(4)		
Date of Interview: 19 March 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2)⊡ applicant's representative]			
Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description:			
Claim(s) discussed: <u>Preliminary Amendment</u> .			
Identification of prior art discussed: <u>N/A</u> .			
Agreement with respect to the claims f)⊠ was reached. g) was not reached. h) N/A.			
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>The former Office Action was directed to the old claims rather than a preliminary Amendment; Mr. Levoritz confirmed that the proper amendments for examination have "F-9054" in the upper left corner, are indicated as amendments, and have the footer "F9054 PRELIM AMEND" in the lower right corner. It was agreed that the previous Action, directed to the wrong claims, would be vacated and another Action would be issued.</u>			
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)			
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.			
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	